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CONFIRMATION NO. 4418

Bib Data Sheet

|                             |  |              |                        |                                       |
|-----------------------------|--|--------------|------------------------|---------------------------------------|
| SERIAL NUMBER<br>10/674,395 | FILING OR 371(c)<br>DATE<br>10/01/2003<br>RULE | CLASS<br>514 | GROUP ART UNIT<br>1623 | ATTORNEY<br>DOCKET NO.<br>057971-5006 |
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/415,452 10/01/2002 and claims benefit of 60/418,818 10/11/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***  
**\*\* 01/02/2004**

|                                 |   |                        |                     |                    |                         |
|---------------------------------|---|------------------------|---------------------|--------------------|-------------------------|
| Foreign Priority claimed        | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR COUNTRY<br>PA | SHEETS DRAWING<br>2 | TOTAL CLAIMS<br>49 | INDEPENDENT CLAIMS<br>5 |
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>Allowance<br>Examiner's Signature Initials |                        |                     |                    |                         |

**ADDRESS**

09629

**TITLE**

PPAR-gamma ligands in the treatment of asthma and allergies

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|----------------------------|---|---|
| FILING FEE RECEIVED<br>797 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
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